

**MULTIPLE DEPENDENT CLAIM
FEE CALCULATION SHEET
(FOR USE WITH FORM FD-570)**

SERIAL NO.

FILING DATE

APPLICANT(S)

CLAIMS

	AS FILED		AFTER 1st ABANDONMENT		AFTER 2nd ABANDONMENT	
	NO.	DEF.	NO.	DEF.	NO.	DEF.
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TOTAL NO.	3					
TOTAL DEF.	18					
TOTAL	21					

	NO.	DEF.	NO.	DEF.	NO.	DEF.
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TOTAL NO.						
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